



Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$)**450.00**

Complete if Known

Application Number	09/936,979
Filing Date	January 24, 2002
First Named Inventor	William Melvin
Examiner Name	Brandon J. Petterolf
Art Unit	1642
Attorney Docket No.	1012-010300US

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☒ Other (please identify): Deposit Account

☒ Deposit Account Deposit Account Number: 50-0893 Deposit Account Name: Quine Intellectual Property Law Group, P.C.

For the above identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
Total Claims		
- 20 or HP =		
HP = highest number of total claims paid for, if greater than 20.		
Indep. Claims		
- 3 or HP =		
HP = highest number of independent claims paid for, if greater than 3.		

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 27 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	(\$)	Fee Paid (\$)
- 100	/50 =	Round up to a whole number) x		

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

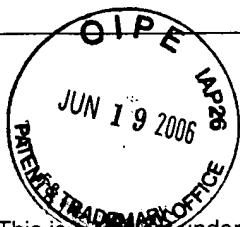
Other (e.g., late filing surcharge):		
Other: <u>Petition for Extension of Time for 2 Months</u>		450.00
Other:		
Other:		
Other:		
Other:		
Other:		

SUBMITTED BY

Signature	<u>Gary Baker</u>	Registration No.	41,595	Telephone	510 769-3510
Name (Print/Type)	Gary Baker	(Attorney/Agent)		Date	June 16, 2006

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional)
1012-010300US



In re Application of William Melvin and Graeme Iam Murray

Application Number: 09/936,979

Filed: January 24, 2002

For ANTIBODIES SPECIFIC FOR CYP1B1

Group Art Unit 1642

Examiner Brandon J. Petterolf

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above-identified application.

The requested extension and appropriate non-small-entity fee are as follows
(check time period desired):

- ☐ One month (37 CFR 1.17(a)(1)) \$120
- ☒ Two months (37 CFR 1.17(a)(2)) \$450
- ☐ Three months (37 CFR 1.17(a)(3)) \$1020
- ☐ Four months (37 CFR 1.17(a)(4)) \$1590
- ☐ Five months (37 CFR 1.17(a)(5)) \$2160
- ☐ Applicant is a small entity under 37 CFR 1.9 and 1.27, therefore the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.

A small entity statement under 37 CFR 1.27:

- ☐ is enclosed.
- ☐ has already been filed in this application.

- ☐ A check in the amount of the fee is enclosed.
- ☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.
- ☒ The Commissioner is hereby authorized to charge any fees that may be required, or credit any overpayment, to Deposit Account Number 50-0893.

- I am the ☐ assignee of record of the entire interest.
- ☐ applicant.
- ☒ attorney or agent of record.
- ☐ attorney or agent under 37 CFR 1.34(a)
Registration number if acting under 37 CFR 1.34(a): _____.

June 16, 2006
Date

Gary Baker
Signature

Gary Baker, 41,595
Typed or printed name and Reg. No.

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, DC 20231 on the date below:

Typed or
Printed Name

Deborah Berwick

Signature

Deborah Berwick

Date

June 16, 2006